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APPLICATION NUMBER	FILING DATE: C	CLASS SUBCL	ASS GROUP AR	T UNIT EXAMINER

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NOTICE OF ALLOWANCE MAILED		CLAIMS ALLOWED			
	Assistant Examiner	Total Claims Print Claim for O.G			
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Amount Due Date Paid		Sheets Drwg. Figs.Drwg. Print Fig.			
	Primary Examiner				
TERMINAL	PREPARED FOR ISSUE	Application Examiner			
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